

Illinois Insurance

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Electronic complaint handling system

-by Mary Petersen, Consumer Services Section

To better serve the consumers of Illinois, the Department of Insurance is in the process of converting its complaint handling system from a manual paper system to an electronic system. The ultimate goal of this project is to improve the efficiency and expediency of the Department's handling of complaints.

An electronic system will shorten processing and turn-around time, reduce storage and retrieval problems, and provide instantaneous tracking of files.

Although the system has not been finalized at this time, the process we envision includes scanning complaints received by the Department as soon as they arrive and then electronically transmitting them to the company (insurer, HMO, third party administrator, etc.). All communications regarding the complaint, including the response, would be electronically transmitted back to the Department for immediate placement into the electronic complaint file.

The initial stages of the project have been implemented. An electronic group mailbox has been set up at the Department for purposes of communicating with companies regarding complaints. The group e-mail address is included on the cover letter of every complaint sent to companies by the Department. E-mail responses to complaints should be sent as attachments and

must be on company letterhead or include the name, address and telephone number of the company at the top of the attachment.

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Additionally, we have launched a pilot project whereby we are electronically transmitting to companies complaints received on the Department website from consumers. This process allows us to send the complaint to the company on the same day it is received from the consumer, thereby eliminating delays often encountered with the paper system.

Approximately seventeen companies are participating in this project. Currently, the volume of complaints handled in this manner is very low due to the fact that only a small percentage of complaints are received via e-mail. If your company is interested in joining this project, please contact one of the following individuals for more information:

Dale Emerson

L/A&H and P&C companies
(217) 785-5045; or

Dave Grant

HMOs, LHSOs, and voluntaries
(217) 524-0213.

Full implementation of the electronic complaint handling process is not expected for several more months while we work out the details and address various concerns. We recognize that the paper transfer of some complaints will always be necessary, such as in the instance of small companies which are not equipped to handle electronic communications, or when supporting documentation is too extensive to be electronically transmitted. We are also aware of concerns surrounding the electronic transmission of medical records.

We will keep the industry informed of our progress on this project. If you have any questions, comments or suggestions regarding the project, please contact Mary Petersen at (217) 785-7346. ♦

IL establishes statutory accounting issues committee

-by Jim Hanson, Financial-Corporate Regulatory Division

With the implementation of the NAIC Statutory Accounting Practices and Procedures Manual on January 1, 2001, it is anticipated that many questions of interpretation will arise. Domestic insurers are encouraged to submit these questions directly to the Illinois Department of Insurance rather than to the NAIC. Department staff can answer most of these questions, and coming to us first will help reduce the workload at the NAIC in addition to keeping the Department apprised of inquiries by Illinois companies.

Accounting questions will be submitted to a newly formed Statutory Accounting Issues Committee comprised of five financial analysts from the Department's Springfield office. Inquiries may come from companies, the financial examinations staff, the financial analysis staff or other sources: e.g., consultants and client

representatives. Those who inquire will be advised of the final decision. However, since the circumstances surrounding a particular question are unique, issues, decisions or interpretations will not be made public.

The Committee will review all requests and make recommendations to the Director to either accept or reject requests for deviation from prescribed practices or interpretations. Those accepted will be deemed either to be in accordance with the NAIC Accounting Practices and Procedures Manual or a permitted practice. In some instances, we may also forward inquiries to the NAIC for their consideration after Departmental review.

Any questions regarding accounting issues can be submitted to James M. Hanson, Assistant to the Deputy Director, at (217) 782-6284 or jim_hanson@ins.state.il.us ♦

New NAIC assignments

Following are the Illinois Department's NAIC assignments for 2001. Working groups and subgroups are not included. This year's list includes four new committee memberships (designated by *) and a move from Vice Chair to Chair of the Holocaust Task Force.

Midwestern Zone, **Chair**
 (EX) Executive Committee
 (B) Senior Issues Task Force
 (B) Health Insurance Task Force
 (C) Property and Casualty Insurance Committee*
 (C) Workers' Compensation Task Force
 (C) Surplus Lines Task Force
 (C) Casualty Actuarial Task Force
 (D) Market Conduct and Consumer Affairs Committee*
 (D) Market Conduct Examination Oversight Task Force
 (E) Financial Condition Committee
 (E) Accounting Practices and Procedures Task Force
 (E) Blanks Task Force
 (E) Examination Oversight Task Force
 (E) Risk-Based Capital Task Force
 (E) Valuation of Securities Task Force, **Chair**
 (E) Insolvency Task Force, **Chair**
 (F) Financial Regulation Standards and Accreditation Committee
 (G) Special Insurance Issues Committee
 (G) Antifraud Task Force
 (G) Information Systems Task Force
 (G) Regulatory Re-Engineering Task Force
 (G) Financial Services Modernization Task Force
 (G) Reinsurance Task Force
 (H) International Insurance Relations Committee*
 (H) International Holocaust Commission Task Force, **Chair**
 Consumer Liaison Committee*
 Life and Health Actuarial (Technical) Task Force
 NAIC/HCFA Liaison Committee ♦

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Director of Insurance Nathaniel S. Shapo
 Assistant Director Madelynne L. Brown
 Editor Nan Nases
 Graphics Shelley McQuern

Illinois Department of Insurance vacancies

The Illinois Department of Insurance is accepting applications for the following vacancies:

Position Title:

Insurance Company Financial Examiner Trainee

Salary Range:

\$2,381-\$3,040 per month

Position Description: Under immediate supervision of an examiner-in-charge, for a period not to exceed twelve months, receives training and is assigned various tasks of increasing difficulty to develop knowledge, understanding and practical skills requisite for examining financial records of property and casualty and life, accident and health insurance companies; receives instruction to determine compliance with the Illinois Insurance Code, rules and regulations and accepted insurance accounting practices; communicates with company personnel and other examiners regarding examination procedures and findings. Duties of this position are conducted at the insurance company site which requires extensive travel by the incumbent(s). Performs other duties as required or assigned which are reasonably within the scope of the duties enumerated above.

Requirements: Requires a bachelors degree with 21 semester hours of accounting with additional coursework preferably in computer science, economics, management, finance or other related subjects; requires knowledge and understanding of and ability to demonstrate basic accounting concepts and principles; requires strong oral and written communication skills and ability to represent the agency in a competent and professional manner; requires familiarity with utilizing a personal computer or laptop and a basic understanding of electronic spreadsheets and word processing applications; requires a valid driver's license. ♦

Position Title:

Insurance Company Field Staff Examiner

Salary Range:

\$2,500-\$3,549 per month

Position Description: Under direct supervision of an examiner-in-charge, performs a variety of tasks in examining the financial and non-financial records of property and casualty and life, accident and health insurance companies; determines compliance by application of the Illinois Insurance Code, rules and regulations and accepted insurance accounting practices; communicates with company personnel and other examiners regarding examination procedures and findings. Duties of this position are conducted at the insurance company site which requires extensive travel by the incumbent(s). Performs other duties as required or assigned which are reasonably within the scope of the duties enumerated above.

Requirements: Requires a bachelors degree with 21 semester hours of accounting with additional coursework preferably in computer science, economics, management, finance or other related subjects; requires one year of professional insurance accounting experience in the financial examination of insurance companies, or completion of an approved training program; requires knowledge and understanding of and ability to demonstrate basic insurance accounting concepts and principles; requires strong oral and written communication skills and ability to represent the agency in a competent and professional manner; requires experience and a demonstrable skill in utilizing computer software applications including an electronic spreadsheet and word processor in the examination process; requires possession of a valid driver's license. ♦

Position Title:

Insurance Performance Examiner I

Salary Range:

\$2,288-\$3,205 per month

Position Description: Under general supervision, performs specialized work in the examination and review of rates and rating procedures used by life, accident and health and property and casualty insurance companies, to insure compliance with the Illinois Insurance Code and Departmental rules and regulations; reviews claim files to determine the company's performance at the time an insured incurs a loss; traveling to examination site, confers with, advises and provides information to insurance company representatives regarding examination findings; prepares reports on examination findings. Performs other duties as required or assigned which are reasonably within the scope of the duties enumerated above.

Requirements: Requires knowledge, skill and mental development equivalent to completion of four years of college with major course work in insurance; six months underwriting and/or claims experience; willingness and ability to travel extensively. ♦



Where to apply: Candidates for any of the above positions should contact:

Illinois Department of Insurance
Personnel Management Section
Attention: Jennifer
320 West Washington Street
Springfield, Illinois 62767
Phone: (217) 782-1761
e-mail: jennifer@ins.state.il.us ♦

The Illinois Department of Insurance is an equal opportunity, affirmative action employer.

Actuarial advisory on Regulation XXX

(In mid-December, our Chief Life Actuary, Larry Gorski, mailed an advisory to all valuation actuaries of life insurance companies and fraternal organizations licensed in Illinois, discussing pending issues on Regulation XXX, guaranteed living benefits, and regulatory asset adequacy. The full text of the company bulletin (CB # 2000-12) is available on our web site at www.state.il.us/ins/cb/cb0012.htm. Following are the key elements of the advisory.)

Regulation XXX

With the statutory valuation for year-end 2000, the role of the Appointed Actuary continues to grow in importance. The major development this year for many Appointed Actuaries will be compliance with Regulation XXX. As such, there are three questions that an Appointed Actuary must answer:

1. Does Regulation XXX apply?
2. How should Regulation XXX be applied?
3. What X factors should be used?

While professional and regulatory issues still exist concerning each of the three questions, over the first six months of 2001, our Chief Life Actuary intends to meet with the Appointed Actuaries of several insurers, both domestic and foreign, to review the process used by the actuary to set the X factors.

One question concerning Regulation XXX and the X Factors that has been asked several times is "How should changes in reserves due to changes in X Factors be reported in the statutory financial statement?" The position of the Illinois Department's Life Actuarial Unit is that changes in reserves due to changes in X factors should be reported through the Summary of Operations and not through the "below the line" changes in the Capital and Surplus Account. We do not equate changes in X factors with a change in valuation basis. Consistent with this position, we believe that changes in reserves due to asset adequacy analysis should be reflected in the Summary of Operations and not directly in the Capital and Surplus Account.

Sample X Factor Actuarial Opinion

The X Factors, in conjunction with select factor adjusted mortality rates, reflect anticipated future mortality subject to the following conditions:

1. The X factors meet all the requirements of Section 5B(3) of the Model.
2. The X factors do not reflect mortality improvement beyond the date of valuation.
3. The X factors take into account relevant, emerging company experience.
4. The appropriateness of the X factor has been evaluated using appropriate statistical techniques.

Equity Indexed Life and Annuity Actuarial Opinions

On the subject of actuarial opinions, all companies either insuring or reinsuring equity indexed annuity or life insurance products must submit the actuarial opinion required by Actuarial Guideline 35 and 36 respectively. The equity indexed annuity and life insurance opinions should be sent directly to our Chief Actuary and not attached to the normal Section 7 or Section 8 opinion.

Guaranteed Living Benefits

One of the "hot" topics this year is reserves for variable annuities with guaranteed living benefits. The issue is really much broader than just reserves. It includes benefit pricing and risk management. Again, the Department's Life Actuary intends to meet with several insurers over the early part of 2001 to review the level of statutory reserves held for these benefits, the extent and quality of the work done by the Appointed Actuary relative to the testing of adequacy of the statutory reserves, and the insurer's risk management program relative to these benefits.

Regulatory Asset Adequacy Issues Summary

This year we are again requesting that the Appointed Actuary submit a Regulatory Asset Adequacy Issues Summary (RAAIS) to us by March 15,

2001. A description of the items to be included in the RAAIS is listed below. The description has not changed from last year. The RAAIS is considered a confidential document by our Department, and will be destroyed each year upon receipt and review of the following year's RAAIS. Because it is considered confidential, the RAAIS should not be sent with the annual statement, but should be stamped "confidential" and submitted directly to Mr. Bruce Sartain, ASA, at the Illinois Department of Insurance in Springfield. The request for an RAAIS is a standing request.

Details of the Regulatory Asset Adequacy Issues Summary

1. When an actuarial opinion under Section 8 is provided, the regulatory asset adequacy issues summary shall also be provided. It shall specify:
 - a. For each of the required interest rate scenarios which produce negative ending surplus values in the aggregate as defined in Section 10.A, the amount of additional reserve as of the valuation date which, if held would eliminate such negative aggregate surplus values. Ending surplus values must be determined by either extending the projection period until the in-force and associated assets and liabilities at the end of the projection period are immaterial or by adjusting the surplus amount at the end of the projection period by an amount which appropriately estimates the value which can reasonably be expected to arise from the assets and liabilities remaining in force.

(cont'd on p. 5)

Regulation XXX (cont'd from pg. 4)

- b. The extent to which the appointed actuary uses assumptions in the asset adequacy analysis that are materially different than the assumptions used in the previous asset adequacy analysis.
 - c. The amount of reserves and the identity of the product lines that were subjected to asset adequacy analysis in the prior opinion but were not subject to analysis for the current opinion.
 - d. The number of additional interest rate scenarios tested identifying separately the number of deterministic scenarios and stochastic scenarios.
 - e. If sensitivity testing was performed, identify the assumptions tested.
 - f. Comments shall be provided on any interim results that may be of significant concern to the appointed actuary.
 - g. The methods used by the actuary to recognize the impact of reinsurance on the company's cash flows, including both assets and liabilities, under each of the scenarios tested.
 - h. Whether the actuary has been satisfied that all options affecting cash flows embedded in fixed income securities and equity-like features in any investments have been appropriately considered in the asset adequacy analysis.
2. The regulatory asset adequacy issues summary shall contain the name of the insurance company for which the regulatory asset adequacy issues summary is being supplied and shall be signed by the appointed actuary rendering the opinion.

Questions on any of these issues should be directed to Larry Gorski at (217) 782-1794 or by e-mail at larry_gorski@ins.state.il.us. ♦

Department rules review

The full text of Department rules is printed in the *Illinois Register* published weekly by the Illinois Secretary of State's Index Department, 111 E. Monroe St., Springfield, IL 62756. Subscriptions are available from that source for an annual fee of \$290. Issue numbers and a Department contact person are listed below after each rule summary.

Copies of rules are also available upon written request to the Department of Insurance at a \$1 per page charge. Some rules are posted on the Department's website at www.state.il.us/ins/industryinfo.htm. Adopted rules are codified in Title 50 of the Illinois Administrative Code.

Rule 928 (Medical Malpractice Data Base) was amended January 1, 2001, to update the actual formal requirements for insurers to file medical malpractice information with the Department. Companies have the option to file claim information electronically using a comma delimited format or using the Microsoft Word software program developed by the Department. The Department prefers that claim information be filed electronically, but does not require it at this time. (Vol. 24, #53; Yoko Chism).

Rule 2008 (Minimum Standards for Individual and Group Medicare Supplement Insurance) was amended January 1, 2001, to ensure that individuals who are involuntarily disenrolled from a Medicare HMO that withdraws from the market will have the same guarantees available to them as insureds who voluntarily disenroll. (Vol. 24, #53; Linda Fritz).

Rule 4001 (Privacy of Personal Information) was adopted December 19, 2000, to implement Article XL of the Illinois Insurance Code (215 ILCS 5/1001) and Title V of the Gramm-Leach-Bliley Act governing the treatment of personal financial information by the licensees of the Illinois Department of Insurance in relation to the compliance date. (Vol. 24, #53; Chuck Feinen).

Rule 5101 (Small Employer Carrier Actuarial Certification and Documentation Requirements) was adopted December 19, 2000, to set standards for the filing and contents of a small employer carrier actuarial certification required pursuant to Section 30(b) of the Small Employer Health Insurance Rating Act [215 ILCS 93/30(b)]. (Vol. 24, #53; Chuck Feinen). ♦

Staff announcements

Congratulations to **Yvonne Clearwater**, Life, Accident and Health Compliance Section, who earned the Managed Healthcare Professional designation from the Health Insurance Association of America.

Year end 2000 marked the retirement of several valued employees, some of whom are well known to the insurance industry and others of whom have served behind the scenes. Our best wishes to:

Shirley Springer, Cost Containment Section, 30 years
Betty Dugger, Record Services Section, 29 years
Lynn Ralph, Pension Division, 22 years
Ron Hartsock, Producer Section, 21 years
Don Erickson, Consumer Outreach Unit, 8 years
Bob Stevens, Cost Containment Section, 8 years
Jim Verkuilen, Regulatory Action Section, 8 years. ♦

Financial examinations

Reviewing the general controls in the information systems environment

-by Tom Farrell, Financial Examination Section

The financial examination is a time honored process by which the Illinois Insurance Department places a team of financial examiners on site at a domestic insurance company for the purpose of determining the financial condition and regulatory compliance of the company. These financial examinations are performed on a cyclical basis every three, four or five years, depending on the size of the company. Examination procedures followed by the examination staff during the course of the examination are fully documented in the Financial Examiners Handbook, which is developed, distributed and maintained by the National Association of Insurance Commissioners (NAIC).

Approximately six years ago, the NAIC decided to redirect the methodology underlying the financial examination process by introducing the *risk based auditing* approach to financial examinations. In general, the risk based approach directs the examination staff to conduct the examination by first measuring the level of controls in a company's financial processing environment and then developing an audit program commensurate with such level.

Since virtually all of today's modern insurance company financial processing is computer based, much of the decision concerning the reliability of the company's control environment is based upon evidence collected by examiners with respect to the company's information systems area.

In particular, the examiners target the general control environment of the information system area for review at the initiation of the examination. This review includes such areas as system development and implementation, program change management and system wide security, as well as contingency planning for recovering from a processing center disaster. But perhaps the most important element of the examiner's computer controls review is the determination of the existence of an

information systems audit function. The *information systems audit function* pertains to an individual company's commitment to having its computing environment reviewed on a periodic basis (annually is recommended) by either the company's internal audit staff or the company's public accounting firm. The auditors present company management with written reports targeting deficiencies as well as recommendations to correct those deficiencies, and management should respond to the report items in a timely fashion.

Perhaps the most important element of the examiner's computer controls review is the determination of the existence of an information systems audit function.

Using guidelines from the NAIC, information systems audit specialists from the Illinois Department accept responsibility for determining the integrity of the information systems control environment prior to the onset of examination field work. This is accomplished using standardized questionnaires, interviews with company personnel and documentation reviews.

The Illinois Department maintains a small staff of information systems specialists to review the controls during financial examinations. However, the volume of examinations during any given year reduces the effectiveness of the specialists in performing the level of review necessary to make a solid determination

about the control environment of a company's information systems area. Instead, information systems specialists who participate in financial examinations have come to rely heavily on the *information systems audit function* effort of the company's internal audit staff, public accounting firm or both.

The Illinois Insurance Department regards the efforts by domestic insurers to have an independent review of the information systems general control environment performed by qualified information systems auditors on a periodic basis, especially in the period previous to the initiation of a financial examination, to be a prudent practice. When such a report is available, the examiners are more easily able to make a judgment concerning the entire control environment. Without such a report available, examiners usually cite the company for this deficiency in the report of examination. The Insurance Department anticipates that each company under examination has provided for the *information systems audit function* through an arrangement with the public accounting firm or by maintaining an internal audit staff which includes an information systems professional.

For additional information regarding the activities of the information systems audit specialist during the financial examination process, please contact:

Tom Farrell
Illinois Department of Insurance
(312) 814-2424
tom_farrell@ins.state.il.us ♦

Producer regulatory action

(Copies of regulatory orders are available upon written request to the Producer Regulatory Unit, for \$1/page. The number of pages are indicated in parentheses following the effective date.)

Revocation of Licensing Authority

Robert R. Brown
9821 South Tripp
Oak Lawn, IL 60453
Effective 12/21/00 (3)

William L. Hall Jr.
2707 Krishire Dr.
Charleston, IL 61920
Effective 11/28/00 (1)

Carlos A. Pereda
6447 N. Winchester Ave.
Chicago, IL 60626
Effective 11/06/00 (2)

Stipulation and Consent Order—Civil Forfeiture Paid

Lee A. Bloomfield
733 Jefferson Ave., Apt 7
Elgin, IL 60120
Effective 9/29/00 (3)

Frederick Crosby
8530 S. Euclid
Chicago, IL 60617
Effective 10/23/00 (4)

Dennis M. Doyle
4055 Chinkapin Oak
Smithton, IL 62285
Effective 10/04/00 (4)

Jack D. Henning
6039 N. 14000 E. Road
Momence, IL 60954
Effective 12/15/00 (3)

Henry Flemming Sr.
18150 S. Kedzie, Apt. 202
Hazel Crest, IL 60429
Effective 12/15/00 (3)

Marvell-Tower Insurance Agencies,
Inc.
435 N. LaSalle St.
Chicago, IL 60610
Effective 10/23/00 (5)

Denial of Request for License

Angus Butler
1164 S. Elizabeth Ave.
Chicago, IL 60643
Effective 12/08/00 (3)

Daniel J. Hartong
PMB101643 N. 98th St.
Omaha, NE 68114
Effective 11/06/00 (2)

Stipulation and Consent Order—Civil Forfeiture Not Paid

Mitchell D. Wilson
8050 S. Wabash
Chicago, IL 60619
Effective 10/04/00

Bess B. Relyea
1318 Douglas St.
Joliet, IL 60435
Effective 10/05/00 (4)

Douglas C. Relyea
1318 Douglas St.
Joliet, IL 60435
Effective 10/05/00 (4)

Harold E. Relyea
1318 Douglas St.
Joliet, IL 60435
Effective 10/05/00 (4)

SRK Insurance Specialist, Inc.
1318 Douglas St.
Joliet, IL 60435
Effective 10/05/00 (4)

Lewis W. Zimpelmann
19411 Bryant Ct.
Mokena, IL 60448
Effective 11/17/00 (5)♦

Company action

New Companies

GMAC Insurance Online, Inc.,
MO, 12/13/00
ISMIE Indemnity Company, IL,
12/31/00
Midwest Family Mutual
Insurance Company, MN, 11/30/00
Minnesota Lawyers Mutual
Insurance Company, MN, 12/13/00
North Pointe Insurance
Company, MI, 12/21/00

Market Conduct Fines

The following entities were issued Stipulation and Consent Orders and fined for Insurance Code violations and/or improper claims practices cited in their Illinois market conduct examinations:

American States Life Insurance
Company, WA, 12/30/00; \$15,000
Hartford Insurance Company of
Illinois, IL, 12/14/00; \$40,000
Jackson National Life Insurance
Company, MI, 12/28/00; \$5,000

Terminations

Acceleration National Insurance
Company, OH, suspended 1/1/01
until 6/3/02

Conestoga Life Assurance
Company, PA, certificate of
authority revoked 12/14/00

Credit General Insurance
Company, OH, suspended 12/14/00;
subsequently placed in liquidation
by the Franklin County (Ohio)
Court of Common Pleas on 1/5/01.

Instant Auto Insurance
Company, MO, suspended 1/1/01
until 12/31/02

The Lumber Mutual Insurance
Company, MA, suspended 1/1/01
until 12/31/02♦

Hearings

Scheduled Hearings:

Argus Health Plans, Inc.
Dean Tucci
Hearing No. 3814
Cease and desist 1/31/01

David & Patricia McKinney
State Farm Fire & Casualty Co.
Hearing No. 3816
Cancellation 1/30/01

Robert L. Munoz
Hearing No. 3817
Denial of licensing authority 2/7/01

Gary D. Pickett
Hearing No. 3818
Suspension of licensing authority
2/14/01

Matters Settled without Hearing:

Health Partners of the Midwest
Hearing No. 3813
Dismissed 12/28/00

Geraline Pearson
Hartford Insurance Company
of the Midwest
Hearing No. 3810
Dismissed 12/8/00

Completed Hearings:

Fannie Burford
State Farm Fire & Casualty Co.
Hearing No. 3815
Nonrenewal effective 1/11/01

W. J. Foster & Company, Inc.
Thomas Foster
Thomas Foster, Jr.
Hearing No. 3788
Order of revocation previously
issued rescinded; civil penalties
assessed 1/8/01

Helen Kren
Pekin Insurance Company
Hearing No. 3806
Cancellation effective 11/30/00

Mr. & Mrs. Ronald Rodgers
Safeco Insurance Company of IL
Hearing No. 3812
Cancellation effective 12/28/00 ♦

Exam reports filed

Financial

Workers' Compensation Trust of
Illinois
11/15/00

Market Conduct

American Ambassador Casualty
Insurance Company
11/30/00
American States Life Insurance
Company
12/30/00
CNA Casualty of Illinois
12/12/00
Jackson National Life Insurance
Company
12/28/00
Mercury Insurance Company of
Illinois
01/08/01
USAA General Indemnity Company
12/13/00
West Coast Life Insurance
Company
11/30/00 ♦

Illinois Department of Insurance
320 West Washington Street
Springfield, Illinois 62767

Address Service Requested

PRSRT STD
U.S. Postage
PAID
Springfield, IL 62767
Permit No. 821